## ISSUE FEE TRANSMITTAL

500.00-142B

U.S. Department of Commerce Patent and Trademark Office

This form is provided in lieu of a formal transmittal and should be used for transmitt	
INVENTOR S NAME S  Street Address of the str	MAILING INSTRUCTIONS  All further correspondence including the Issue Fee Receipt, the Patent, and advanced orders will be mailed to the addressee entered in section 1 on PTOL-85c, unless you direct otherwise by specifying the appropriate name and address in 1 A below.
City, State and Zip Code	2A. The COMMISSIONER OF PATENTS AND TRADE-MARKS is requested to apply the Issue Fee to the application identified below.
CO-INVENTOR'S NAME	
Street Address	(Signature of perty in interest of record)  (Date)  (Date)
City, State and Zip Code	Note: The Issue Fee will not be accepted from anyone other than the applicant; a registered attorney or agent; or the
Check if additional changes are on reverse side.	assignee or other party in interest as shown by the records of the Patent and Trademark Office.
SC/SERIAL NO. FILING DATE TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT DATE MAILED
06/253,678 04/13/81 024 00	.55, E 233 12/02/82
First Named NETRAVALID Applicant  Applicant	
-	APPLN. TYPE SMALL ENTITY FEE DUE DATE DUE  UTILITY NO \$500.00 03/02/23
1A. Further correspondence to be mailed to the following:	B. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR, alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed.  1 Barry H. Freedman  2 2 3
DO NOT USE	THIS SPACE
02/23/83 &53698	1 142 500.00 CK
3. ASSIGNMENT DATA (print or type)	4.
A. (1) This application is NOT assigned. (2) X Assignment previously submitted to the Patent and Trademark Office. (3) Assignment submitted herewith.	The following fees are enclose:  ☐ Issue fee ☐ Advanced order ☐ Assignment recording
B. For Printing On The Patent: (Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data below is only appropriate when an assignment has been previously submitted to the PTO or is submitted herewith. Completion of this form is NOT a substitute for filing of an assignment as required by 37 C.F.R. 1.334).	The following fees should be charged to deposit acc. no.  (PTOL-85c or additional copy of PTOL-85b must be enclosed)
(1) NAME OF ASSIGNEE: Bell Telephone Laboratories, Incorporated	☐ Issue fee ☐ Advanced order
(2) ADDRESS: (City & State or Country) Murray Hill, N. J.	☐ Assignment recording
(3) STATE OF INCORPORATION, IF ASSIGNEE IS A CORPORATION: New York	Number of advanced order copies requested (must be for 10 or more copies)
· · · · · · · · · · · · · · · · · · ·	- their